

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	h		
O.I.P.E. CLASSIFIER		43	5/31/01
FORMALITY REVIEW	FR	1018	6/29/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☐ Rejected  
☐ Allowed  
☐ (Through numeral) Canceled  
☐ Restricted  
☐ N  
☐ I  
☐ A  
☐ O  
☐ Non-elected  
☐ Interference  
☐ Appeal  
☐ Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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